



Environment, Health & Safety Division

March 15, 2006

DIR-06-009

To: Aundra Richards, Manager  
DOE-Berkeley Site Office

From: Howard K. Hatayama, Acting Director  
LBNL EH&S Division

Re: Status of ISM Peer Review Corrective Action Plan Development – Week of 3/13/06

This is the second weekly report to you regarding the status of development of our ISM Peer Review Corrective Action Plan (CAP).

#### **Actions Related to Findings in the Report**

The following are actions being taken by the Laboratory that further respond to the findings in the report.

- The Divisions continue to aggressively reinforce line management responsibility for safety. These actions include: biweekly safety walk-throughs by senior facilities managers, development of MSD-specific EH&S training for managers, supervisors, PI's, and mentors to be presented by a senior MSD investigator, delivery of training on and revision of safety roles and responsibilities for supervisors and permanent scientific staff in Physics Division, cascaded training of Engineering Division managers and supervisors on integrating safety into day-to-day activities.
- While the Laboratory's lessons learned program is being revised (see last week's report), the Divisions are improving the availability and communication of lessons learned through various means including: specific agenda topics, posting, inclusion in division newsletters, and incorporating real case studies into training.
- As part of improving our capabilities in root cause analysis, a core group of individuals are being trained in performing rigorous root cause analysis (TapRoot). These individuals represent research and support organizations and will be capable of assisting line management in performing root cause analysis of future safety related incidents.
- A training module on how to perform safety walk-arounds is being developed to support on-going walk-around activities by line managers.

#### **CAP Development**

- Per our report to you last week, Dennis Derkacs returned to the Laboratory to assist in creating a more robust and formal process (see attached) for developing the CAP. I reviewed this plan with you last week and gained your support of the path forward. Also attached is a memo from Mr. Derkacs that details his advice to us that formed the basis for this path forward.

- With regards to the path forward, we will be completing identification of the common themes from our back-look review of incident investigations and other reports (Step I) this week. We do not anticipate any impediments to accomplishing Step II by next Friday, 3/24/06 per the plan.

Thank-you for your continuing support and guidance in this effort. I hope that we are demonstrating our commitment to a rigorous process for developing the CAP as well as a strong commitment to taking actions to address the issues raised by the report. We are mindful that these actions ultimately need to be consistent with the overall direction of the CAP.

cc:

S. Chu

D. McGraw

R. Foley

R. Van Ness

Attachments

# Development of Corrective Action Plan (CAP)

## EH&S Peer Review

### Commitments 23 & 25 of DNFSB Recommendation 2004-1

- I. Identify Themes for Improvement  
CAP Development Team Meeting COB 3/17
- II. Summarize and Consolidate Themes from Backlook Review of Incident Reports and Peer Review Report  
CAP Working Group COB 3/24
- III. Augment Peer Review Report Issues with Validated Lab-wide Issues from Step II: Extent of Condition Review
  - Prioritize issues for inclusion in CAP or for further extent of condition review  
CAP Working Group COB 3/28  
CAP Development Team Review and Validation COB 3/31
- IV. Consolidate Issues into Actionable Categories Based on ISM Principles  
Use Peer Review Report as a Foundation
  - Consolidate and Designate CAP Team Categories and Leaders based on Actionable Items  
CAP Working Group COB 4/10  
CAP Development Team Review and Validation COB 4/14
  - Solicit Input from Division Directors: Is this the right set?  
Director Steve Chu Letter Division Directors COB 4/18  
Reponses COB 4/25
  - Revise List and Teams as Needed  
CAP Working Group COB 4/26  
CAP Development Team Review and Validation COB 4/28
- V. Develop Corrective Actions with Links to ISM Five Core Functions and DNFSB Commitments 23 and 25
  - CAP Teams – First Draft of Corrective Actions COB 5/12
  - Solicit Input from Laboratory Community via Division Directors  
Director Steve Chu Letter to Division Directors COB 5/16  
Response COB 5/26
  - Revise Actions and Submit CAP to DOE/BSO COB 6/1

March 10, 2006

Howard:

Reference: March 2, 2006, e-mail from Aundra Richards, DOE Berkeley Site Office Manager to David McGraw and Steven Chu, "Observations and Recommendations Provided to Me by the DOE Validation Team Lead."

The referenced e-mail recommended that "A thorough root cause analysis and extent of condition review should be conducted based on the results of the Peer Review as well as other reviews that have been conducted by the Laboratory in the recent past,"

Regarding this recommendation, my suggestions, which we discussed on my recent visit of March 8 and 9, are as follows:

1. As suggested in Ms. Richards' e-mail and the Peer Review report, **root cause analysis is best conducted as an integral part of your accident/incident investigation process.** You plan to train many of your staff and Laboratory ESH coordinators in root cause analysis, so they may support future incident investigations. I expect this will yield positive results from future investigations.
2. **The Peer Review Team**, which I participated in, **did look for root causes and latent organizational system weaknesses**, so in effect that portion of the Site Manager's recommendation has been completed.
3. Regarding past incidents, your team, as well as the Peer Review Team, reviewed what I believe to be a complete list of incidents from the last year or so. These were thoughtful reviews, **so the results should be used to initiate improvements in your ISM program.** Conducting root cause analyses of these incidents now would require us to reinvestigate these cases, conduct interviews

with personnel involved, etc. Truthfully, I do not feel that this would be time well spent and the results after the passing of so much time would be questionable.

At this point, I feel it would be better to **focus on thoroughly investigating future incidents using human performance and root cause techniques.**

4. Regarding extent of condition reviews, I feel **the corrective action plan process** that we outlined on March 8 **will cause extent of condition reviews, as necessary.** If an issue from the Peer Review report is specific to one or just a few organizations but the Laboratory management acknowledges that the issue is a Lab-wide issue, the **corrective action plan should address an institutional fix.** Only when Laboratory management feels that the issue is localized should an extent of condition review be conducted to verify how applicable the condition is to the rest of the Laboratory.

Dennis Derkacs

Peer Review Team Member

ISM Project Leader

Los Alamos National Laboratory